

# CLAIMS ONLY

Application Number

10701940

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments		* May be used for additional claims or amendments		* May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51		/			
2		/					52		/			
3		/					53					
4		/					54					
5		/					55					
6		/					56					
7	/						57					
8		/					58					
9		/					59					
10		/					60					
11		/					61					
12		/					62					
13		/					63					
14		/					64					
15		/					65					
16		/					66					
17		/					67					
18	/						68					
19		/					69					
20		/					70					
21		/					71					
22		/					72					
23		/					73					
24		/					74					
25		/					75					
26		/					76					
27		/					77					
28		/					78					
29		/					79					
30	/						80					
31		/					81					
32		/					82					
33		/					83					
34		/					84					
35	/						85					
36		/					86					
37	/						87					
38		/					88					
39	cancel						89					
40		/					90					
41		/					91					
42		/					92					
43		/					93					
44		/					94					
45	/						95					
46	/						96					
47	/						97					
48		/					98					
49	/						99					
50		/					100					
Total Indep	11						Total Indep					
Total Depend	40						Total Depend					
Total Claims	51						Total Claims					